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We should like to ask members and friends of N. A. S. S. W. to take a more active interest in the Bulletin. If you have an article or a suggestion regarding a paper we might publish, SEND IT IN. Manuscripts should be addressed to the Editorial Chairman and can be accepted for publication only on condition they are not being published elsewhere. They should be typewritten doublespaced and there should be two carbon copies. Authors of papers accepted will receive five copies of the issue containing their article.

THE TEACHER'S CONTRIBUTION TO THE CHILD'S SOCIAL DEVELOPMENT*

by *Morris Krugman*, Ph.D.

Chief Psychologist, Bureau of Child Guidance

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1127-9

For a considerable number of years, a battle has been waged in the schools of the country between two opposing factions. Occasionally there is a small flare-up, and the general public is treated to some pyrotechnics; in the main, however, the battle has been quietly conducted, though none-the-less vehemently. On the one hand, we have the traditionalists, who, in spite of all the educational and psychological research, believe that children must be drilled rigorously in the 3 R's, to the exclusion of many curriculum elements they call "fads"; that learning does not occur unless children sit quietly and absorb the classroom instruction; that unquestioning obedience to adults builds character; and that certain of the academic subjects, particularly in the secondary schools, possess qualities that are so universal that they carry over into most other fields of endeavor. On the other hand, we find the school of thought that believes that learning will be more effective if the child is an active participant in the process; that discipline coming from the child is more effective than that imposed from without; that the 3 R's are important tools in the learning process, but that they are only tools and not the ends of education; that education must meet the specific needs of each individual child; and that physical, intellectual, emotional, and social development are important elements in every phase of the educational process, the curriculum constituting the medium through which this development takes place.

The second point of view has been gaining rapidly—in some instances so rapidly, that educational practice has not yet caught up with this philosophy. We find considerable lip-service to the newer concepts in many educational systems, with actual educational practice lagging far behind. When this happens, the opponents of the newer education lose no time in pointing out the inconsistencies.

Modern educational concepts did not develop of, or by, themselves. Their roots can be traced to many sources. Psychology contributed proof of the existence of individual differences, as well as the measurement of these differences by psychological tests. Psychiatry showed the importance of affective factors in learning, and organized the tenets of preventive psychiatry into the field we call mental hygiene. Social work, utilizing

psychiatry, psychology, and sociology, developed practical methods for fostering healthy human relationships and for assisting individuals to adjust better to other individuals and to groups. Modern education has incorporated so much of mental hygiene, psychology, and social work into its philosophy and its practices, that a casual glance would reveal little difference between the ultimate goals of these disciplines and education. Many educators, for example, are now saying that the major objective of education is individual adjustment to the life situation, within the limits of individual potentiality. A psychiatrist treating a private patient, or a social worker assisting a client, would probably state the same goal. The details of the psychiatric, social, or educational process would, of course, be very different.

It would be manifestly untrue to state that children were not well-educated before the advent of psychiatry, psychology, social work, and other modern influences. There always were excellent teachers who intuitively practiced the finest type of mental hygiene without ever having even heard the term. These, however, were rare individuals. In most instances, education was, until comparatively recently, a highly selective process. Those who could not meet rigid standards of achievement and conduct, fell by the wayside, particularly after the elementary grades. The students who remained in the secondary schools or colleges were there by virtue of having survived the rigorous elimination processes. "Adjustment" meant the ability to "take it." In fact, hardships and reverses were considered good for the soul. Those who fell by the way-side were simply not worthy of the education offered them.

Public pressure, resulting in social legislation, child labor laws, and compulsory education laws, brought about a marked change in the school population. It was no longer a question of whether the child could adjust to the curriculum, because he had to be kept in school. It suddenly dawned upon educators that the school may possibly have some responsibility for adjusting to its population. This led naturally and logically to the concept of individualization of education—a concept further promoted by the psychology of individual differences, the development of psychiatry and mental hygiene, the spread of guidance and counseling, and the integrating influence of the visiting teacher and the school social worker.

Schools first became acquainted with social workers through the family case worker, the court worker, the institution social worker, the child-care worker, or workers from other agencies functioning with the family or the individual in trouble. The usefulness of the social worker in dealing with social pathology was soon sufficiently demonstrated to cause some school boards to provide a combination of the teacher and social worker, labelled

visiting teacher. As it turned out, the visiting teacher, who did tremendously important pioneer work in social work in schools, served to bridge the gap between education and social work. Without the visiting teacher era, it is doubtful whether social work would enjoy its present status in schools. Experience over a number of years, however, forced the conclusion that professional teaching and professional social work were both too highly specialized to be embodied in a single person. On the other hand, it also became apparent that the modern well-trained teacher must possess considerable knowledge and appreciation of mental hygiene, psychology, and social work, while the competent social worker must have a corresponding appreciation of education and classroom problems.

Although the modern teacher is not expected to be a psychiatrist, psychologist, or social worker, she does play an important role in the child's social and emotional development. This role can be positive, or it can be negative. To exert a positive influence, the teacher must be aware of the dynamics of human behavior. She must understand human drives, needs and feelings; she must be aware of the complexities of human relationships, and the factors that disturb these relationships. She must be able to sense situations in which she can be of assistance to the child, and those in which she should call for specialized help because they are beyond her. This type of understanding comes intuitively only to a few gifted individuals; most people must acquire such knowledge through training. Unfortunately, most colleges, universities, and teacher-training institutions do not supply it in the usual courses. Experience has shown that day by day contacts of social workers and psychologists with teachers, on specific problems arising in the classroom, are much more effective in inculcating a sound mental hygiene point of view than attendance at the usual theoretical courses offered to teachers. This informal case method type of instruction not only brings results with the specific children involved, but has great carry-over value for the children with whom the teacher will have dealings later.

It is not unusual, in a typical American school system, to find two adjoining classrooms with the widest extremes in educational method. In one classroom we may see the most modern educational practices in use; the teacher's handling of the class easy and relaxed; and the pupil-teacher relationships all that could be desired. In the very next classroom we may see the "good disciplinarian," in whose room we can "hear a pin drop." The teacher does most of the talking; the children sit rigidly at attention much of the time, speaking only when called upon and usually working in unison at a single task. Individual differences are leveled off; social and emotional problems go unrecognized or are suppressed as though they did

*Read at National Conference of Social Work—May 1946—Buffalo, N. Y.
not exist; the child's personality is not respected, a premium being established for robot-like behavior. In such a classroom which is far from atypical, many children may survive unscathed, since the human being is a tough-fibered, resilient animal. Those who survive such handling best are those who are sufficiently healthy to develop mild, temporary, schizoid protection, lasting from 9 A.M. to 3 P.M. on school days only, and discarded immediately at the end of the school day. These are the children who are so fatigued in the classroom every afternoon that they haven't the energy to lift a pencil from the desk, but who, upon leaving the school building, suddenly shoot out as though they were jet propelled. They then spend the afternoon tearing around an athletic field, or racing through the streets.

Other children, however, are not so fortunate in that they do not possess the ability to build temporary protective armor about themselves. They are the ones who react to rigid handling by rebellion, or by withdrawal, or by neurotic symptomatology. It is probably unfair to say that such reactions are caused by the school or teacher. In most instances, case studies would probably show that these children are predisposed to such reactions by factors outside the classroom. The teacher, however, can either alleviate these behavior patterns, or she can aggravate them. The classroom happens to be the environment in which the child spends a large portion of his waking time, and the teacher happens to be the parent substitute for that time. If home factors are instrumental in fostering unhealthy relationships with adults or with other children in the particular child, the classroom can be instrumental in counteracting some of these. Any child guidance clinic can show innumerable examples of neurotic, hostile children, whose behavior is impossible in rigid classrooms, but who are no problems at all in other types of classrooms.

If education is to foster social growth and development on the part of the child, then the curriculum must not place the child in a straight jacket and prevent his growth. Do we wish children to develop with confidence in themselves; with some social consciousness; with respect for others and for their rights; with increasing ability to accept responsibility; with increasing independence of thought and action? If so, then should they not be given ample opportunity through the curriculum to experience success frequently; to participate in social groups; to experience various relationships in different situations with other children; to be given real responsibility in increasing doses; and to be given the opportunity of thinking and working at their own levels at meaningful tasks, rather than fed subject matter by forced feeding? The modern curriculum provides such oppor-

tunities through meaningful content, individual progress, research by the students, active participation, motor and sensory, as well as intellectual activity, co-operation with others through committees, observation of life situations outside the classroom, and participation in group projects, as well as by a variety of other means. The teacher's part in all this is to prepare the environment; to direct the attitudes toward a major goal, subtly, but not to dictate step by step; to supply leadership without suppressing all vestige of leadership in the children; and to be available for guidance at all times.

The teacher thus teaches by directing an active process of learning on the part of the children, rather than pouring knowledge into unwilling ears. In such a process, social and emotional development play a very important part, without, at the same time, neglecting the educational fundamentals. In such a process, the teacher serves as a therapist to many children who need therapy, since she provides for some of the basic needs of children: emotional satisfactions; positive relationships; opportunities for success; a sense of belonging to the group; feelings of adequacy; and provision for individual differences, for abilities and disabilities and for special interests. She may not consciously be a therapist in the sense that the professionally trained worker is, but the net result for all but the seriously disturbed children, is very similar.

Therapy, of course, presupposes diagnosis, and, whether the teacher realizes it or not, she is a diagnostician of sorts. She either knows, or finds out from the school physician or nurse about the child's physical health. In the matter of mental health, she is usually not as well supplied with assistance, although many school systems now furnish social workers, psychologists, or, occasionally, child guidance clinics, including psychiatrists. Psychological tests suitable to the classroom are now almost universally used for determining academic ability, academic achievement, and diagnosis of special disabilities. While these are not as valuable as individual psychological studies conducted by psychologists, they are nevertheless indispensable for today's education program. There are areas, however, where school psychological tests fail to function, and the teacher who uses them may be misled. This is particularly true of most pencil-paper aptitude tests, interest inventories, and tests of emotional or personality status. The latter two, particularly, have failed to yield results that can be compared even crudely with the results of the case study, or with projective techniques like the Rorschach or the Thematic Apperception Test. Some of the better personality rating scales, like the Haggerty-Olsen-Wickman, and the Winnetka, have been found useful for many purposes, and anecdotal records, when further developed, show promise of helping improve teacher judgments

of children's personality.

Important as curriculum and teaching methods are, they do not compare in importance with the personality of the teacher. Teachers whose personal problems affect their relationships with the children under their charge can do much to hinder adequate social development. A social worker visiting classrooms need not be a profound psychiatrist to realize what sadistic handling, both palpable and subtle, does to children. Corporal punishment may not be very common in schools today, but sarcasm, ridicule, nagging, unfavorable comparison, unfair criticism, and open insult are not uncommon, and sometimes are more cruel than physical punishment. A serious aspect of such handling, is that the emotionally healthy child is usually not subjected to it, since he doesn't bring it out. It is the disturbed child, perhaps emotionally deprived at home, whose affect hunger will cause behavior that invites the sadism of the not-too-stable teacher. Such a child will frequently invite punishment by annoying behavior, attention-getting devices, challenging the teacher's authority, failing in his work, and otherwise testing out the teacher's affection for him. The emotionally healthy teacher, particularly if she is oriented in mental hygiene and in the emotional needs of children, will not react violently against the child whose problems she understands, and will find some opportunity to meet some of the needs of such a child without neglecting the rest of her class. Such teachers have, in recent years, become increasingly common, and the healthy climate of such a teacher's classroom is easily distinguished from the superficial orderliness of the other type by the practised eye of the professional worker. No amount of mental hygiene education, however, can transform the disturbed teacher into one whose relationships with her pupils are wholesome. Such a teacher needs therapy on her own account, but experience has shown that she will seldom seek it, or utilize it if it were available. From the long point of view, a sounder method of handling this problem revolves about methods of teacher selection and the selection of candidates for teaching in training institutions.

If, in this discussion, the impression were given that most teachers show severe emotional inadequacies in their dealings with children, that was certainly not the intent of the writer. In emphasizing the deficiencies of some teachers, the perspective of the entire teaching profession may have been lost. The majority of teachers exert a tremendous and positive influence on the social and emotional development of children. The point is that even one emotionally disturbed teacher in a large school is one too many, since her influence spreads over many children.

Finally, in closing, may I make one point about teaching conditions. We are apt to forget that most teachers do not work under conditions that are

conducive to their own personality development or to the best type of teaching. Overcrowded classes, inadequate supplies and books, improper school housing, community restrictions, social pressures, and inadequate salaries, among other factors, all tend to make more difficult a type of work which is among the most difficult of occupations even under optimum conditions. We are frequently justified in criticizing teachers. In leveling such criticism, however, no matter how sound, we do have a responsibility for balancing the picture by recognizing the positive contributions. The influence of the teacher on the emotional and social development of children, however, will be greater still when the teachings of psychiatry, psychology, and social work become more completely integrated into the entire teaching process.

DISCUSSION

by Ruth M. Gartland

of

The Teacher's Contribution to the Child's Social Development

Dr. Krugman has made a valuable contribution to social workers in his presentation of *The Teacher's Contribution to the Child's Social Development*. He has helped us see the two current points of view about education. He has helped us recognize the inevitable lack of understanding of the dynamics of human behavior which some teachers will have because they have been "short-changed" in this area in their school of education. He has mentioned the contribution we may make to the teachers' understanding of the *child-as-a-whole in his social situation* through our day by day contacts with them. He has stimulated us also to be alert to our responsibilities as citizens in joining with others to effect improved selection of candidates for teaching; improved curricula in schools of education and improved selection of members of boards of education who may remedy the conditions he mentions which are handicapping to teachers. Board members need to be helped to see how extravagant is "economy" when it results in conditions which defeat the purpose of education in a democracy—the individual and social usefulness of the citizens of tomorrow. Would that every member of the boards of education throughout this land had in his hands the description of the ideal school given by Dr. Krugman.

At these meetings we have often explored our own feelings about teachers—feelings which may become obstacles in achieving the co-ordination of our separate services to children. Each new social worker has to become aware of and deal with these feelings which are often related to her feelings both positive and negative toward her first teachers, her parents and to other later educational experiences too. Another obstacle in the path of our effective professional relationships with teachers seems to me to be a lack of clarity and a lack of conviction about our own separate profession of social work. The more insecure we are in our own profession, the more we may need to resort to our occupational disease of the use of our terminology—a disease which erects a barrier between us and the teacher. Teachers complain of such statements as the following: "That would *threaten* the child"—"We are helping the mother work through her feelings"—"We are working with the family's feelings around housing." They ask, "What do you mean by threaten?" "Why can't you say you are trying to help the family move to better housing?" "Why must you sound so different?" We can bridge this kind of difference by the use of dramatic imagination, put-

ting ourselves in the teacher's place, being sensitive to the meaning of our words to her, respecting her contribution and our own in working together for the benefit of the children we serve.

Dr. Krugman has said, "Many educators are now saying that the major objective of education is individual adjustment to the life situation within the limits of individual potentiality. A psychiatrist treating a patient or a social worker assisting a client would probably state the same goal. The details of the psychiatric, social or educational process would, of course, be very different." I am glad he added that last sentence. It seems to me that we can make our best contribution only as we work together appropriately in terms of our separate and different professional contributions. I would agree that social workers, teachers, psychiatrists, have a similar broad purpose concerned with the individual and his social contribution. I would like to add that they also have *different* specific purposes, a different focus, different—not lesser preparation for a different—not lesser competence and they work under the auspices of different professions. One has only to read the catalogs in one university of the department of psychiatry, school of medicine, of the department of education and of a school of social work to sense the differences in knowledge and skill and the different professional responsibilities of the members of each profession, and also to see how these separate professional preparations can be co-ordinated for the benefit of the child. Confusion and competition may result unless each profession is proud of its competence and wishes to stay with it, respecting at the same time the different but not lesser competence of other professions. If it were possible for one person to obtain professional preparation for the practice of psychiatry and of teaching and of graduate social work, it would still be necessary for him to choose which profession he would follow, for what specific purpose and under what auspice.

Sometimes we hear questions such as these: "What is the purpose of the social worker in the school? Would she be necessary if the school had a psychiatrist? If inner emotional conflicts interfere with the child's use of school, would not the psychiatrist be the only one necessary to that child? Isn't the teacher interested in making home calls too? She needs to understand the child in his home." If we focus only upon the needs or problems of the child then this confusion may result. One thing which seems to help us emerge from such confusion seems to be a focus upon the specific purpose of our profession and the services it has to offer. Of course the psychiatrist, the social worker and the teacher may all see the same child and the same parents, may discuss the same concerns but they do so for their own specific professional purposes. The psychiatrist's purpose is related to the cure of emotional illness, the teacher's is related to teaching and the social

worker's to the social problems within and without the school which are interfering with children's use of it. Each has a purpose emerging from his professional knowledge and skill. Each furthers the broad purpose of education but only does this appropriately and well "if he sticks to his last." There has been and still is confusion of social case work and therapy. I notice that some case workers speak of case work and not social case work. One often hears social workers say, "I'm becoming interested in this therapy or that therapy." Is it only a question of what interests them or rather of what the profession demands of them? If they wish to become lay psychiatrists or teachers it is their right if they undertake this with responsible preparation, but then it seems to me that they and the profession of social work must recognize that they are leaving the practice of their own profession for that of another, leaving a profession which also has grave shortages of professionally prepared workers. A group of social workers recently were discussing courses in medicine and psychiatry with a group of physicians. When it was mentioned that the students were "interested" in this or that, one of the physicians asked what they needed to know for their professional practice, whether it was their primary interest of the moment or not. It was healthful and helpful to be reminded in this way that along with our rights in any profession, we have our responsibilities, responsibilities which we fail to carry out when we are diverted from our own profession.

If we see the child moving from the social environment of the family and neighborhood to the wider social environment of the school, do we not see him being met at the door, not only by the teacher but also by the physicians of physical and emotional health, by the nurse with her focus upon health education and care, by the psychologist with his contribution in recognizing capacities and limitations and by a social worker who would begin at once to help the child use this wider *social environment which is the school itself* as well as help with other social problems which may be related to his use of school. From the first grade through his school experience any child may have use for one or more of these helpers from time to time with one taking a major part at one time and one at another while the others take a minor part. The school social worker can begin at once to help the child use the *complex social situation*, the mass program, of the school. She can individualize him for the school and can enable him to work on social obstacles in the path of his use of school; can also enable the school to remove some of these obstacles felt by all children. With this kind of immediate helping many later school problems can be prevented. We have moved from an emphasis upon the study of the problem, fact gathering as such, to an emphasis upon using the professional knowledge and skill which is in us in an immediate helping process in social relationships with a new

and changing social environment. We need to be able to help this child in the social situation of the school with his immediate concerns: whether he is well or ill physically or emotionally—bright or dull, whether his home situation is ideal or not. We need to help as we understand and understand as we help. Social problems in family or neighborhood may be referred to other social workers as we continue as school social workers to work with child and parents and teachers to bring about change in the child's use of school in order that he may achieve real education.

In regard to Dr. Krugman's point about the social workers need to have appreciation of class room problems and the teacher's to have dynamic understanding of children and of how the social worker can serve them, I would hope that every school will do as some schools are now doing. In some schools there are routine scheduled conferences where teachers, physicians including psychiatrists, psychologist, nurse and social worker regularly review the needs of those children having difficulty in making the best use of school. This sharing of professional knowledge leads not only to a combined effort in helping the child but also to an understanding of one another's contribution and can lead to a combined effort to bring about change in the school environment itself for the benefit of all children who if not well-educated today will fail in their social contribution to the world of tomorrow. Again may I express our indebtedness to Dr. Krugman for his stimulating paper.

FOR YOUR INFORMATION

A conference was called by the Commissioner of Education and held in the United States Office of Education, Washington, D. C., in June 1945. Among pertinent problems considered were the need (1) to extend Visiting Teacher services to more systems and more children; (2) for a statement of function which is believed to be essential to the growth, adequacy, and efficiency of visiting teacher services; (3) for standardization of qualifications and certification and (4) for progress toward a more uniform adoption of an appropriate title for visiting teachers. A report of this conference by Katherine M. Cook is available in Leaflet No. 75, *Visiting Teacher Services*. It may be purchased thru the Superintendent of Documents, United States Government Printing Office, Washington 25, D. C. Price 5 cents.

MEMBERSHIP

Membership in a professional organization is a strengthening factor for the individual practicing within that profession. This is as true for the school social worker as it has long been for members of other professions. National Association of School Social Workers has members in 34 states and in Hawaii.

All members receive the National Association of School Social Workers Bulletin and other materials such as reprints, book lists, conference programs, notices, and other publicity. Membership is determined by the training and experience of the applicant. There are four types of membership:

Contributing \$5.00 per year; Senior \$3.00 per year; Junior \$2.00 per year; Associate \$1.00 per year. The first three classifications have voting rights and senior members are eligible to hold office.

Applications for membership and a statement of membership requirements may be obtained from the Membership Chairman, Miss Helen E. Weston, 13 South Fitzhugh Street, Rochester 4, New York.

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Copies of previously published Bulletins and additional copies of this issue may be obtained from the N.A.S.S.W. Editorial Chairman, Board of Education, 13 South Fitzhugh Street, Rochester 4, New York. Price varies from 5c to 20c depending upon date of publication.

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We also have some pamphlets—reprints—and reading lists pertaining to school social work. Lists of MATERIAL AVAILABLE can be secured upon request.

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Changes of address should reach the Editorial Committee office as soon as possible.

